PTO/SB/30 (09-04)
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|---|-----------------------|-------------------|--|
| Request For Continued Examination (RCE) Transmittal Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450              | Application Number    | 10/045,122        |  |
|   | Filing Date           | November 9, 2001  |  |
|   | First Named Inventor  | Stypulkowski      |  |
|   | Art Unit              | 3766              |  |
|   | Examiner Name         | Kennedy Schaetzle |  |
|   | Attomey Docket Number | 011738.00024      |  |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| 1. [   | Submission required under 37 C.F.R. 1.114 Note: If the RCE is proper, any previously filed unentered  |  |
|--|---|--|
| in   | mendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant<br>structs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must<br>quest non-entry of such amendment(s). |  |
| а. 🗌   | Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.  |  |
|  | i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on ii. Other  |  |
| b 🗵  | Enclosed  |  |
|  | i.  |  |
| 2. (   | Miscellaneous   |  |
| а  | Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(f) required)  |  |
| b  |   |  |
| 3. (   | The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.   |  |
| a  | □ The Director is hereby authorized to charge the following fees, or credit any overpayments, to  |  |
|  | Deposit Account No. 19-0733. I have enclosed a duplicate copy of this sheet.  |  |
|  | i. SRCE fee required under 37 C.F.R. 1.17(e) ii. Extension of time fee (37 C.F.R. 1.138 and 1.17)   |  |
|  | iii. Other enclosed   |  |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED |                      |                                   |            |
|---|----------------------|-----------------------------------|------------|
| Signature   | /Stephen L. Sheldon/ | Date                              | 09/28/2006 |
| Name (Print /Type)                                  | Stephen L. Sheldon   | Registration No. (Attorney/Agent) | 58,732     |

|  | CERTIFICATE OF MAILING OR TRANSMISSION |  |
|--|--|--|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Slop RCE. Commissioner for Palents, P. O. Box 1450, Alexandria, VA 22313-1450 or facisinile transmitted to the U.S. Patent and Trademark Office on the date shown below. |  |  |
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This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and substituting the completed application from the USFTO. There will visit of yearing upon the individual case. Any comments on the amount of time you unquies to complete this form and/or suggestions for reducing this burder, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office. (U.S. Patient and Trademark Office.) Experiment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop ReC, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop Rec, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop Rec, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop Rec, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TO: Mail Stop Rec, Commissioner for Patients, P.O. Sox 1450, Alexandria, VA 22313-1450. D NO TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TST EEES ON COMPLETED FORMST OTHIS ADDRESS. SEND TST EEES ON CO